

POSITION	ID NO.	DATE
CLASSIFIER	55	6/14/95
EXAMINER	780	6/20
TYPIST	716	6-21
VERIFIER	111	12/4/95
CORPS CORR.		
SPEC. HAND	452	12-5-95
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
1	1	✓	6-6
2	✓		6-12
3	✓		6-13
4	✓		6-14
5	✓		6-15
6	✓		6-16
7	✓		6-17
8	✓		6-18
9	✓		6-19
10	✓		6-20
11	✓		6-21
12	✓		6-22
13	✓		6-23
14	✓		6-24
15	✓		6-25
16	✓		6-26
17	✓		6-27
18	✓		6-28
19	✓		6-29
20	✓		6-30
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SYMBOLS

✓	Rejected
-	Allowed
(Through number)	Cancelled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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TITLE _____ ADDRESS _____